

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO

IN RE	*	BKRTCY. NO. 22-00462 MCF
ALVARADO MUÑOZ, JULIO ANGEL	*	CHAPTER 13
xxx-xx-2662	*	
DEBTOR		

**DEBTOR'S NOTICE OF FILING OF *AMENDED SCHEDULE "J"*
OFFICIAL FORM 106J**

TO THE HONORABLE COURT:

COMES NOW, JULIO ANGEL ALVARADO MUÑOZ, the Debtor in the above captioned case, through the undersigned attorney, and very respectfully states and prays as follows:

1. The Debtor is hereby submitting *Amended Schedule "J"*, dated April 05, 2022, herewith and attached to this motion.

2. The *Amended Schedule "J"* is filed to inform under Part 1, Item #2, the Debtor's dependent (1), which due to an involuntary omission, the same had not been included in the Debtor's original *Schedule "J"*, Docket No. 01, in the above captioned case.

NOTICE PURSUANT TO LOCAL BANKRUPTCY RULE 1009(b)

Within thirty (30) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

CERTIFICATE OF SERVICE

I CERTIFY, that on this same date a copy of this Notice was filed with the Clerk of the Court using the CM/ECF system which will send notice of same to the Chapter 13 Trustee, the US Trustee's Office, and to all CM/ECF participants; I also certify that a copy of this notice was sent via regular US mail to the Debtor and to all creditors and interested parties appearing in the master address list (CM/ECF non-participants), hereby attached.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 5th day of April, 2022.

/s/Roberto Figueroa Carrasquillo

USDC #203614

RFIGUEROA CARRASQUILLO LAW OFFICE PSC

ATTORNEY FOR the DEBTOR

PO BOX 186 CAGUAS PR 00726

TEL NO 787-744-7699; 787-963-7699

Email: rfc@rfigueroalaw.com

Fill in this information to identify your case:

Debtor 1 JULIO ANGEL ALVARADO MUNOZ

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN
DIVISION

Case number 3:22-bk-462
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

1

- ☐ No
- ☒ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☐ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 88.00

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. \$ 0.00

4b. \$ 0.00

4c. \$ 40.00

4d. \$ 0.00

5. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ <u>129.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>45.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>171.00</u>
6d. Other. Specify: <u>Gas (dryer & stove)</u>	6d. \$ <u>35.00</u>
7. Food and housekeeping supplies	7. \$ <u>621.00</u>
8. Childcare and children's education costs	8. \$ <u>471.67</u>
9. Clothing, laundry, and dry cleaning	9. \$ <u>65.00</u>
10. Personal care products and services	10. \$ <u>40.00</u>
11. Medical and dental expenses	11. \$ <u>10.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>613.34</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <u>15.39</u>
14. Charitable contributions and religious donations	14. \$ <u>0.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ <u>0.00</u>
15b. Health insurance	15b. \$ <u>0.00</u>
15c. Vehicle insurance	15c. \$ <u>0.00</u>
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ <u>561.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ <u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	\$ <u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>
21. Other: Specify: _____	21. +\$ <u>0.00</u>
22. Calculate your monthly expenses	
22a. Add lines 4 through 21.	\$ <u>2,905.40</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ _____
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ <u>2,905.40</u>
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <u>3,055.40</u>
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>2,905.40</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ <u>150.00</u>

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

 Explain here: NONE

Fill in this information to identify your case:

Debtor 1 JULIO ANGEL ALVARADO MUNOZ
First Name Middle Name Last Name

Debtor 2
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN DIVISION

Case number 3:22-bk-462
(if known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X JULIO ANGEL ALVARADO MUNOZ
Signature of Debtor 1

Date 4.5.2022

X _____
Signature of Debtor 2

Date _____

Label Matrix for local noticing
0104-3
Case 22-00462-MCF13
District of Puerto Rico
Old San Juan
Tue Apr 5 12:43:41 AST 2022

Coop A/C Sagrada Familia
PO Box 102
Corozal, PR 00783-0102

ORIENTAL BANK-AUTOS
DE DIEGO LAW OFFICES, PSC
PO BOX 79552
CAROLINA
CAROLINA, PR 00984-9552

DTOP
PO Box 41269
San Juan, PR 00940-1269

US Bankruptcy Court District of P.R.
Jose V Toledo Fed Bldg & US Courthouse
300 Recinto Sur Street, Room 109
San Juan, PR 00901-1964

Oriental Bank
PO Box 195115
San Juan, PR 00919-5115

Oriental Bank-Autos
PO Box 79552
Carolina, PR 00984-9552

Thd/Cbna
PO Box 6497
Sioux Falls, SD 57117-6497

JOSE RAMON CARRION MORALES
PO BOX 9023884
SAN JUAN, PR 00902-3884

JULIO ANGEL ALVARADO MUNOZ
PO BOX 1103
MOROVIS, PR 00687-1103

MONSITA LECAROS ARRIBAS
OFFICE OF THE US TRUSTEE (UST)
OCHOA BUILDING
500 TANCA STREET SUITE 301
SAN JUAN, PR 00901

ROBERTO FIGUEROA CARRASQUILLO
PO BOX 186
CAGUAS, PR 00726-0186

End of Label Matrix
Mailable recipients 11
Bypassed recipients 0
Total 11